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IMPORTANT NOTICE

TELECOPY/FACSIMILE COVER LETTER

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TO:

FROM:

U.S. Patent and Trademark Office

DATE:

September 29, 2005

Examiner: Michael M. Trinh

Art Unit: 2822

John P. Scherlacher

TIME:

TOTAL NO. OF PAGES, INCLUDING COVER:

8

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MESSAGE:

RE: U.S. Patent Application Serial No.: 10/714,497, Our Ref. 81784.0293

I hereby certify that the following documents:

- Amendment/Amendment Transmittal Letter

are being facsimile transmitted to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, for filing in the above application.

> September 29, 2005 Date of Deposit

honda Hurt

TELECOPY/FAX NUMBER:	(571) 273-8300 - Art Unit 2822	
CLIENT NUMBER:	81784.0293	
TTORNEY BILLING NUMBER:	1931	
CONFIRMATION NUMBER:	(please return fax to Rhonda Hurt)	

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T-698 P.002/008 F-785

FORM PTO-1083

81784.0293

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In re application of: Motoaki WAKUI, et al.

Serial No: 10/714,497

Filed: November 14, 2003

DISK RECORDING SYSTEM B DATA READING AND STRAIGHTFORWARD CONVERSION TO DIGITAL

DATA

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Transmitted herewith is an amendment in the above-identified application.

No additional fee is required.

Art Unit:

2822

SEP 2 9 2005

Michael M. Trinh Examiner:

> I hereby certify that this correspondence is being transmitted via facsimile to

(571) 273-8300:

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450 on

September 29, 2005 Date of Deposit

Rhonda Hurt Name nona opature

09/29/05 Date

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENOMENT 6		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR		(Col. 3) PRESENT EXTRA*	LG/SM S ENTITY F	LG/SM S ENTITY FEE		ADD'L FEE DUE	
TOTAL CLAIMS FEE		-20	20	**	0	LG⊏\$50 SM=\$25	\$50	\$	0	
INDEPENDENT CLAIMS FEE	1	-3	3	***	. 0	LG=\$200 \$M=\$100	\$200	\$ ·	0	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS LARGE ENTITY FEE = \$360 SMALL ENTITY FEE = \$180								\$	٥	
ADDITIONAL SIZE FEE (IF ANY) (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER) \$250 FOR EACH ADDITIONAL 50 SHEETS								\$. 0	
						T	OTAL	\$	C	

If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 9.
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

A check in the amount of \$_0_ to cover the additional claims fee is enclosed. A copy of this sheet is enclosed.

A check in the amount of \$_-0- to cover the extension fee is enclosed. A copy of this sheet is enclosed.

The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. A copy of this sheet is enclosed.

Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims

Any patent application processing fees under 37 C.F.R. § 1.17 X

Respectfully submitted,

Date: September 29, 2005

Biltmore Tower

500 South Grand Avenue, Suite 1900

Los Angeles, California 90071 Telephone: 213 337-6700 Facsimile: 213 337-6701

6hh P. Scherlacher Registration No. 23,009

Attorney for Applicant(s)

Appl. No. 10/714,497 Amdt. Dated September 29, 2005 Reply to Office Action of June 30, 2005 Attorney Docket No. 81784.0293 Customer No.: 26021

Art Unit: 2822

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09/29/05

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Motoaki WAKUI, et al. Serial No: 10/714,497 Confirmation No.: 1021

Filed:

November 14, 2003

For:

METHOD FOR MANUFACTURING A SEMICONDUCTOR DEVICE HAVING MULTIPLE LAMINATED LAYERS OF

DIFFERENT MATERIALS

AMENDMENT

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated June 30, 2005, please amend the above-referenced application as follows:

Amendments to the Claims are reflected in the Listing of Claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 4 of this paper.

I hereby certify that this correspondence is being transmitted via facsimile to (571) 273-8300: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 on September 29, 2005 Date of Deposit Rhonda Hurt Name Costida Hust

Examiner: Michael M. Trinh